

St Albans

INTERNSHIPS

***And Residences at Naval Hospital
St. Albans***







ERRATA

The spelling of "Residences" on the cover page should be corrected to read "Residencies." Printer's error.





FOREWORD

Medical education is the basis for quality patient care. The Navy wholeheartedly supports this thesis through programs spanning a medical officer's entire career, beginning with an internship. The internship is regarded as the keystone of the educational program, and this brochure is intended to acquaint you with some of the opportunities available in the Navy Medical Corps to further your professional capability.

G. M. Davis

G. M. DAVIS
Vice Admiral, MC, USN
Surgeon General

NAVAL HOSPITAL

ST. ALBANS, NEW YORK

GENERAL INFORMATION

The Naval Hospital, St. Albans, New York, is a general hospital with a bed capacity of 1500.

Located on Long Island in the Borough of Queens in Greater New York, it consists of a permanent brick building of modern design and various auxiliary structures. It is surrounded by spacious wooded grounds and can be reached easily by bus or automobile. A station of the Long Island Railroad is adjacent to the hospital grounds.

It is the largest military hospital in the Greater New York area. It serves the hospital needs of active duty and retired personnel, and respective dependents, of the Army and Air Force as well as the Navy and Marine Corps. Serving as it does such a large population concentration, a broad age range of patients of both sexes is assured.

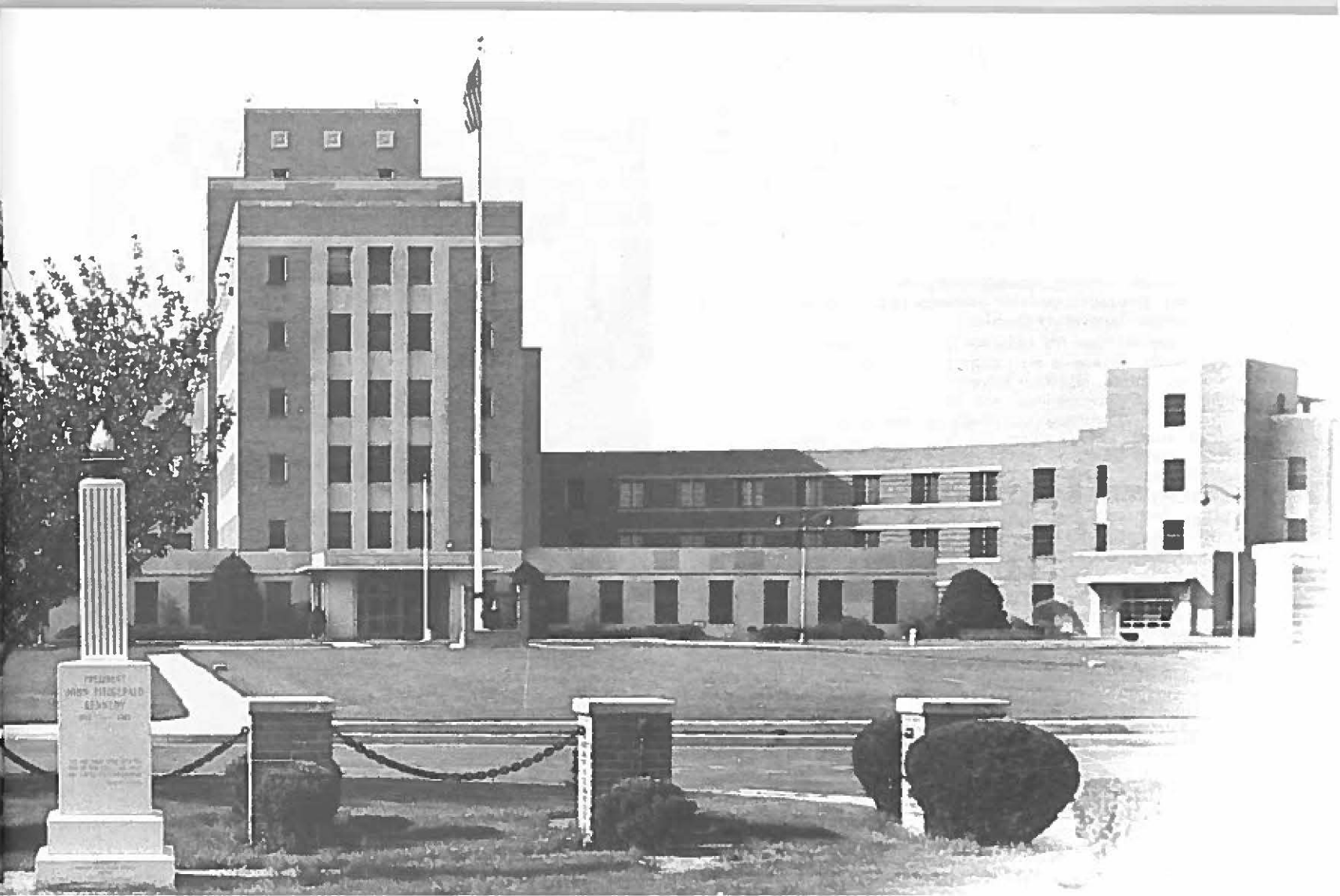
The hospital provides a full spectrum of advanced diagnostic and therapeutic services in all the specialties and subspecialties that would be expected in a large, modern, metropolitan hospital. Screening and specialty outpatient clinics are active. Clinical and laboratory research projects are supported by a well-equipped animal laboratory. In addition, the hospital has a tuberculosis diagnostic and treatment unit which serves as the Tuberculosis Treatment Center for the Navy on the East Coast. It is an integral part of the hospital and is a unique feature in that it affords a nuance of clinical experience not ordinarily expected in a general hospital.

HOUSING AND RECREATIONAL FACILITIES

Excellent civilian housing and limited military housing is available in the Long Island area. Bachelor Officers' Quarters are available for bachelor interns or married interns without their families.

The hospital is a community in itself, with a tri-faith chapel, movie theater, swimming pool, bowling alley, gymnasium, playing fields, Officers' Club, and services such as a bank, Fire Department, post office, Navy Exchange and service station.





THE ST. ALBANS NAVAL INTERNSHIP

The primary function of the Naval Hospital is to provide facilities for the care of sick and injured. Medical care for both inpatients and outpatients is provided for active duty and retired military of the Navy, Army, Marine Corps, Air Force, and Coast Guard. The families of active duty personnel and retired military, and all other eligible individuals are treated at the hospital. St. Albans thus serves a large population concentration of all ages and of both sexes. St. Albans is a designated special treatment facility for neurosurgery, histoplasmosis, tuberculosis and pulmonary disease, oncology, plastic surgery, thoracic surgery, cardiovascular surgery, hemodialysis, and a research center for pulmonary and cardiovascular diseases, and is also designated as a radioisotope laboratory facility.

Good medical care for patients requires a team approach; the intern at St. Albans is an integral and vital part of the team. A well organized, effective intern training program is provided which will enhance patient care, but is not dependent upon the intern. With appropriate guidance and encouragement from the staff physicians, all of whom are full time, the Naval internship should evolve into one of the most important phases of one's medical education.

Three types of internships are available at St. Albans.

Rotating 0. Four months medicine, 3 months surgery, 1 month pediatrics, 1 month obstetrics and gynecology, and 3 months electives. Electives are offered in practically all subspecialties that the individual intern may desire.

Rotating 1. Major emphasis medicine. Consists of 6 to 8 months medicine plus electives.

Rotating 2. Major emphasis surgery. Consists of 6 to 8 months surgery, 4 months medicine (electives as time permits).

Each intern's program is arranged with the desires of the individual intern a major consideration. Interns are assigned duty every third night.

Residency training immediately after internship at St. Albans and at other Naval hospitals is available for well-qualified selected interns. St. Albans offers residencies in anesthesiology, pathology, internal medicine, radiology, surgery, thoracic surgery, and urology. Ten of the sixteen interns completing the internship in June of 1969 are now in Navy residency programs.

The following is a description of the programs of the major services of St. Albans Naval Hospital through which the intern may rotate.



APPOINTMENT

Appointments to naval internship are limited to those successful applicants, regardless of sex, race, creed, or national origin, who are matched to the Navy under the terms of the National Intern Matching Program.

For the purpose of the matching program, you are matched to the naval hospital of your choice. You should indicate your preference of naval hospital on the intern matching program sheet. If you find that you are not matched under the matching program to your choice of civilian or military hospitals, please feel free to contact the Bureau of Medicine and Surgery, Department of the Navy, Washington, D. C. 20390 or the Commanding Officer, Naval Hospital, St. Albans, New York 11425.

Listed below are several pertinent facts to remember in seeking an appointment as a naval intern:

- (1) Register with the matching program at the time and in the manner prescribed.
- (2) Contact the recruiting station or any naval hospital and your hospital of choice (medical students in the Ensign 1915 program are furnished applications to submit by mail).
- (3) Feel free to contact the Commanding Officer, Naval Hospital, St. Albans, New York 11425, 212 526-1000, EXTENSION 200 at any time for information and/or assistance in this or any other related matter.
- (4) Participation in the Navy Ensign Medical Program while in medical school is NOT a prerequisite for appointment to a naval internship.

SERVICE OBLIGATIONS

There is no additional obligated service required in return for a naval internship. Male interns who are under 35 years of age and have not fulfilled their military obligations will be retained on active duty after internship for two years, or, if so obligated, for a longer period. It is expected that "pay-back" time for Navy residency training will be abolished July 1, 1970. Therefore, there will be no greater obligation for residency training in a Naval hospital than for civilian residency training under the Berry plan. During internship, the naval intern can state his preference for future duty. It is Navy policy to fulfill the intern's request if at all possible.

WHERE TO APPLY

Applications may be submitted by visiting any naval hospital or any of the recruiting stations. Medical students in the Ensign 1915 program will be furnished applications to be submitted by mail.

TERM OF CONTRACT

Navy internships generally begin on 1 July. Off-season graduates (other than May or June) can begin training at any mutually agreeable time.

WHEN TO SUBMIT APPLICATIONS

Applications for commissions in the Navy Medical Corps for intern training are accepted between 1 September and 1 December of each year. That portion of the application pertaining to internship is supplied for submission during the period 1 October to 1 December, in accordance with the provisions of the National Intern Matching Program. In order to permit processing in sufficient time to meet all deadline dates, it is suggested that all applications be submitted as early as possible.

REQUIREMENTS FOR APPLICATION

Be a graduate or a potential graduate of a medical school listed as approved by the Council on Medical Education and Hospitals of the American Medical Association.

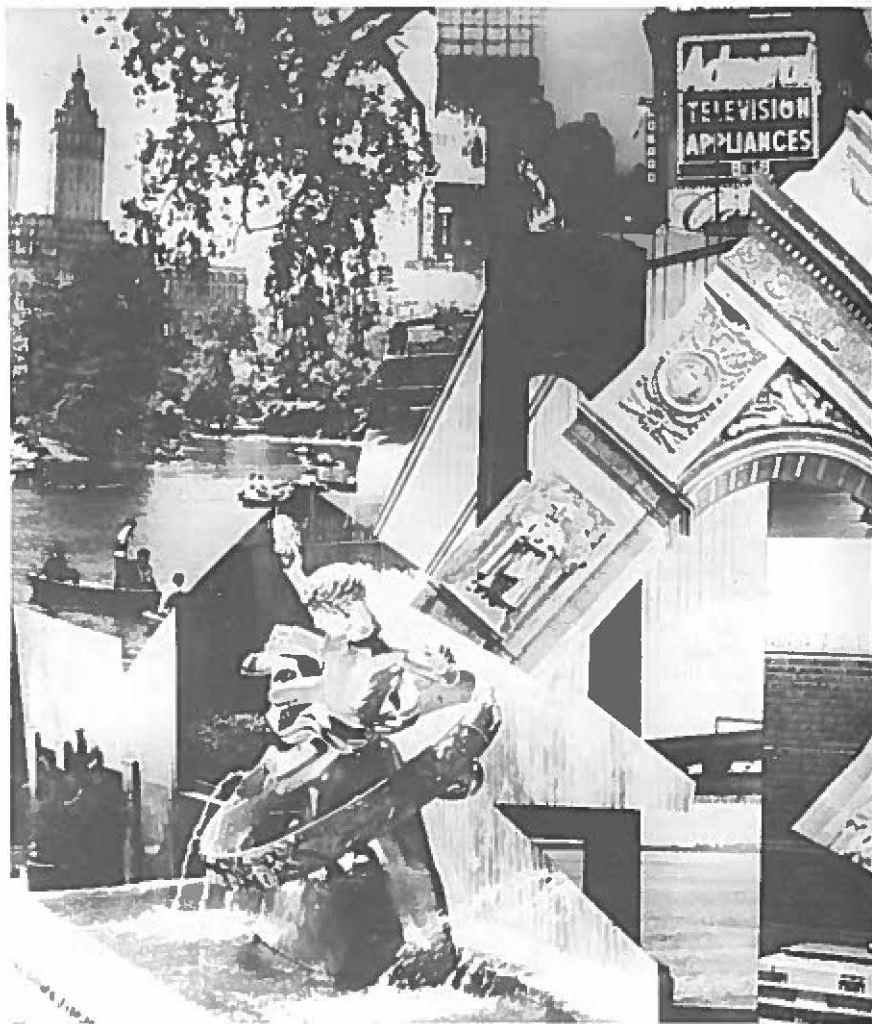
Qualifications of graduates of foreign medical schools may be established through satisfactory completion of the American Medical Qualification Examination administered by the Educational Council for Foreign Medical Graduates, 1633 Central Street, Evanston, Illinois 60201.

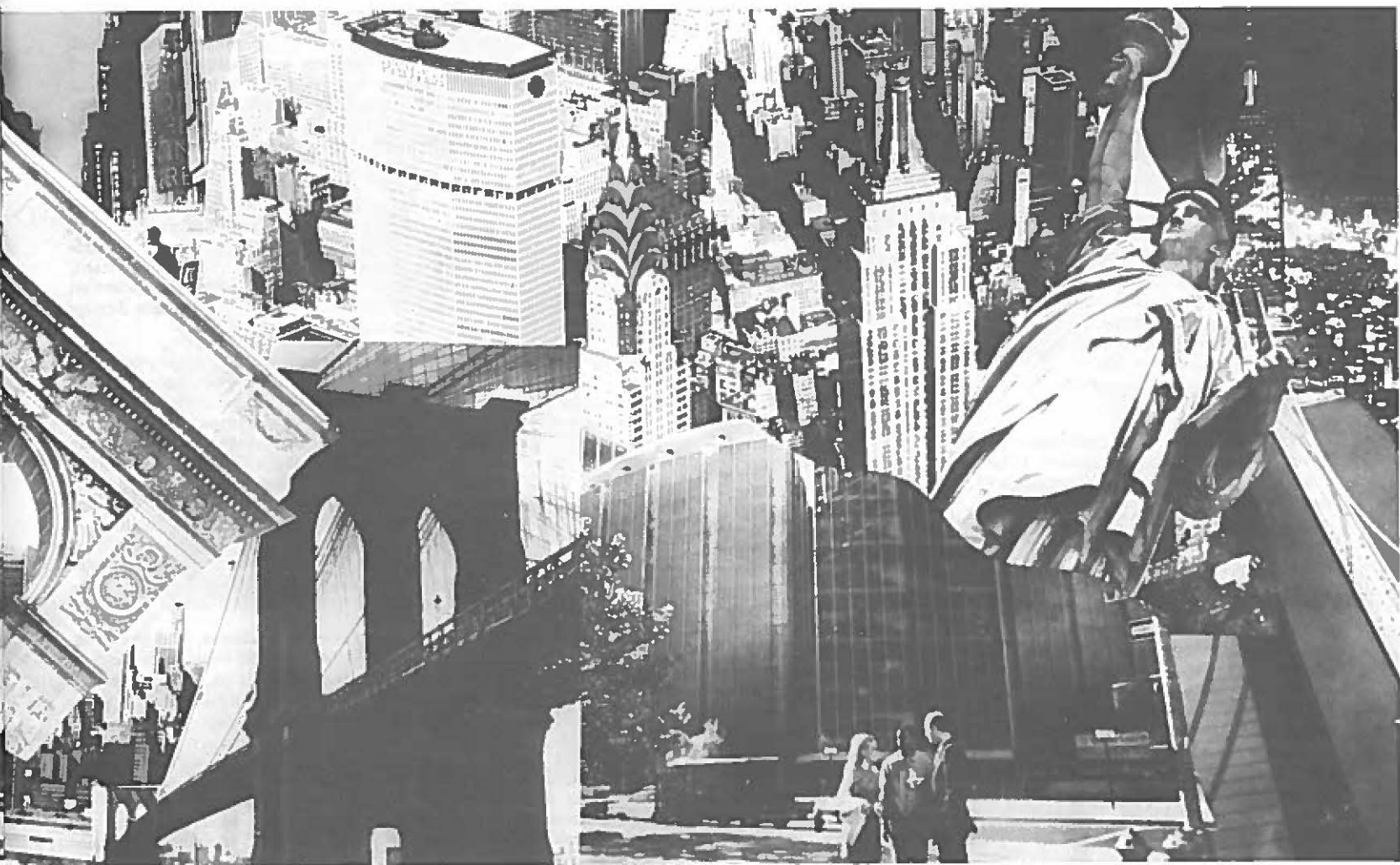
ATTRACTIONS IN NEW YORK

Due to the hospital's proximity to metropolitan New York, numerous cultural, educational and sight-seeing opportunities are available. These include the Lincoln Center for Performing Arts, Museum of Natural History, Metropolitan Museum of Art, the United Nations Building, Statue of Liberty, and Rockefeller Center. There are year-round activities at Yankee Stadium, Shea Stadium, and Madison Square Garden which include baseball, football, basketball, soccer, and ice hockey. Greenwich Village, Belmont and Aqueduct racetracks, and the trotters at Yonkers and Roosevelt raceways are easily accessible by car within 15 to 30 minutes from the hospital. There are outstanding theatrical personalities and musical groups appearing at the Westbury Theater. Other attractions include Coney Island, Jones Beach, and Orchard Beach. There are excellent opportunities for sailing and fishing. There are numerous public golf courses within a 40-minute drive as well as many country clubs. The finest gourmet restaurants in the world can be found on Long Island and in New York City. The department stores, shopping malls, and discount stores offer the consumer the widest variety of merchandise and discounts. Broadway and legitimate theaters are other star attractions. Free distribution of tickets is made available to the military by the United Service Organizations (USO). These tickets include admission to legitimate theaters and sports arenas in the Greater New York Area.

The hospital is within one hour's travel time of civilian medical centers such as New Jersey College of Medicine, Columbia-Presbyterian Medical Center, New York University-Bellevue Medical Center, Memorial Hospital for Cancer and Allied Diseases, the State University of New York School of Medicine, and the Albert Einstein College of Medicine.

Transportation to Manhattan by train, subway, or by private automobile requires approximately 30 to 45 minutes. Kennedy International and LaGuardia Airports are both a 15-minute drive from the Naval Hospital.





HISTORICAL BACKGROUND

On February 15, 1943, the Naval Hospital, St. Albans, New York was opened. A permanent building at St. Albans was opened on August 15, 1951 and nearly all wards, clinics, and offices were moved into the new building.

The main hospital building houses nine wards in each of its wings, east and west, two floors in the center portion for officer patients, a full sixth floor for operating and recovery rooms, and basements for various clinics, administrative offices and food services.

The auditorium is fully equipped for theatrical productions and movies. Of significant interest is the Medical Museum located on the first floor. The medical library is well-equipped and staffed by two full-time medical librarians. There is a non-sectarian chapel with a revolving altar for three faiths, Protestant, Catholic and Jewish.

MEDICAL SERVICE

The Medical Service maintains a 250-bed General Medicine Service in addition to a 130-bed Tuberculosis Section, the latter constituting the Naval Tuberculosis Treatment Center for the Eastern United States.

The Medical Service encompasses the Pulmonary Disease Branch which includes a Tuberculosis Section, a nontuberculosis Pulmonary and Contagion Section, and a well-equipped Pulmonary Function Laboratory; the Internal Medicine Branch, which includes Sections of Hematology, Endocrinology and Renal Diseases; the Gastroenterology Branch; the Cardiology Branch, including complete Heart Station and Cardiac Catheterization Laboratory Facilities; the General Medicine Branch, including outpatient facilities and clinics; and the Preventive Medicine Branch. All Branches and Sections are headed by fully trained board certified or board eligible specialists in the respective fields.

The average daily census for the service is 305 patients, with 3,862 annual admissions, autopsy rate of 56 percent, and 20,865 outpatient visits. The outpatient clinics include Internal Medicine, General Medicine, Hematology, Gastroenterology, Chest-Tuberculosis, Endocrinology, Cardiology, and Problem Medical-Obstetrical Clinics.

Training of interns and residents is given major emphasis on the Medical Service. Rotating interns are assigned to each of four wards, including a female ward, for one month each during their four months' rotation on the Medical Service. Primary responsibility for patient care is emphasized, supervision being provided by residents and staff medical officers who provide appropriate consultative services in their specialties. Limited outpatient clinic experience is also provided, permitting the intern to follow his recently discharged patients as desired and indicated. Major Emphasis Interns are generally assigned to the service for a total of eight months, permitting greater experience in specific subspecialty areas, both inpatient and outpatient, as appropriate to the individual. Greater independence of action and initiative are expected of the Major Emphasis Intern during the latter months of his training.

Three positions are offered in each year of the three-year residency program. Additionally, there is a one-year program for one resident in Pulmonary Diseases. The residency training program consists of two phases, the first encompassing the first two years of training consisting of ward rotations and clinic assignments tailored to provide experience in all of the subspecialty areas mentioned above. This includes a three-month period of affiliation in cardiology at St. Francis Hospital, Roslyn, New York. The second phase, during the third year includes a period of service as chief resident and a system of electives, including affiliations with local medical school hospitals for further experience in allergy, immunology, renal diseases, endocrinology, and metabolic diseases.

A full schedule of teaching conferences, lectures, and teaching rounds is provided, in which both interns and residents participate actively and assume varying responsibilities. These include Basic Science Lectures, Journal Club, Morbidity-Mortality Conferences, Rounds with Chief of Service and subspecialty Branch and Section Heads, General Medical Conferences, and Specialty Conferences utilizing a number of civilian consultants from major medical schools and teaching hospitals in the area. Each resident is encouraged to develop an independent research or clinical investigative project, as appropriate to his other commitments and to the facilities of the hospital, including the animal research laboratory.



SURGICAL RESEARCH UNIT

The research capacities of this hospital are considered to be extensive. The Research Unit and its staff are available to expedite and coordinate all research done at this hospital, including projects by Surgery, Thoracic and Cardiovascular Surgery, Surgical Subspecialties, Chest Medicine, Medicine, Pediatrics, Radiology-Radioisotope Service, Anesthesiology, Oral Surgery and Dentistry, and Cardiopulmonary Laboratory.

Of special interest is research in the pulmonary and cardiac fields now in progress. Research in the use of the heart-lung

machines and in open-heart surgical techniques constitutes one of the most regular and active applications of our research laboratory.

A large, well-equipped Research Unit exists within the hospital structure, including animal housing. This ready accessibility of the Research Laboratory allows staff doctors to take better advantage of available time, for the purpose of research opportunities. The laboratory is available to all staff medical and dental officers, including interns, residents, and externs (clinical and research clerks).

SURGICAL SERVICE

This service sustains a fully approved and accredited four-year surgical residency and an intern teaching program which compare favorably with the majority of teaching programs which may be found anywhere in the world.

Maintaining a daily census of between 400 and 500 cases, the Surgical Service admitted 3,193 patients during the 1968-1969 year, while having almost 11,000 outpatient visits. The autopsy rate was 83% on 42 deaths.

The well-rounded program offers opportunities for rotations on all of the surgical subspecialties including thoracic and cardiovascular surgery, with frequent performance of many operations by residents under instruction of a staff surgeon. Upon successful completion of their four-year residency in surgery, the resident is well prepared to cope with the practice of general surgery anywhere in the world, military or civilian, with good general knowledge of preoperative, operative, and postoperative

care and is board eligible. A unique attraction of this program is the opportunity for the third-year resident to elect three months of his training on a hospital ship.

For the intern, the program offers well-rounded, varied exposure to all types of surgical cases, male, female, and pediatric, with accent on specific teaching of pre and postoperative care. Each intern generally performs (under direct supervision) a minimum of six hernioplasties and several appendectomies, as well as minor procedures.

The teaching program is augmented by use of consultants from teaching hospitals and medical schools in New York City and New Jersey, both clinical and basic science types, including a course in practical anatomy (with dissection of cadaver) each year, in addition to a full schedule of teaching conferences and lectures.



PEDIATRIC SERVICE

The Pediatric Service provides the major treatment nucleus for dependent children of all military services residing within the Greater New York Area. As such, it treats a wealth of clinical material, all of which is available for teaching purposes. In addition, the service acts as a referral center for diagnostic and subspecialty pediatric problems from military facilities in northern New Jersey, New York, and central and western Connecticut.

The basic internship rotation on Pediatrics consists of one month devoted primarily to the diagnosis and treatment of the more commonly encountered acute pediatric problems. In conjunction with daily supervised clinical experience, an integrated problem of didactic lectures, demonstrations, and films relating to the material encountered is presented. A second month is usually elected during which the intern gains experience in the management of pediatric inpatients and newborns—including the principles of pre- and postoperative management, fluid and electrolyte therapy, and specialized diagnostic and therapeutic procedures. At the request of the intern, a third month can be made available during which he may work closely with trained staff members in such pediatric subspecialty fields as pediatric cardiology and behavioral disorders or may elect further experience in the areas encountered in the previous two-month period.

The facilities maintained by the Pediatric Service include a 30-bed children's ward, a complete nursery with isolation facilities including an intensive care nursery, outpatient general pediatric and pediatric subspecialty clinic, well baby and immunization clinics, and a pediatric emergency area. Each area is supervised by a fully-trained, board certified or board eligible pediatrician.



OBSTETRICS AND GYNECOLOGY SERVICE

The Obstetrics and Gynecology Section contains three fully equipped delivery rooms, modern labor rooms with ten beds and an emergency admission room. A complete nursery with isolation facilities, a premature nursery and all facilities for the care of the newborn are included. Cesarean sections are done in the delivery room suite. A ward with 16 semi-private and 4 private beds is used for the care of the gynecology patient. Gynecologic surgery is performed in the main operating room. There is a complete radiology department for cancer therapy.

The primary mission of the service is to afford proper care to any female patient, active or retired, and all eligible dependents presenting themselves for treatment. Consistent with the mission is the desire and ability to train interns in the fundamentals of good obstetrical and gynecological practice.

There are approximately 65 deliveries per month, the majority of which are performed by the intern under the supervision of a staff physician. The Gynecology Clinic is active with approximately 500 outpatient visits per month. There is an average of 45 admissions to the Gynecology Ward per month, with 12 major

surgical procedures per month being performed. A wide range of cases encompassing the specialty is seen.

The Staff consists of the Chief of Obstetrics and Gynecology, who is a diplomate of the American Board of Obstetrics and Gynecology, and three other fully trained board eligible physicians. An active program of rounds, consultant lectures, Journal Club and tape sessions, as well as individual teaching is carried out.

OPHTHALMOLOGY SERVICE

The Ophthalmology Staff consists of two fully trained ophthalmologists and one optometrist. The average monthly outpatient visits and inpatient consultations total approximately 650.

The interns who choose a month's elective in ophthalmology are assigned to the offices of the staff ophthalmologists to learn the fundamentals of recognition of common problems and to observe the basic methods of ophthalmologic therapy and the handling of patients. They assist in the care and treatment of inpatients and outpatients.



ORTHOPEDIC SERVICE

The Orthopedic Service census exceeds 500. The types of problems seen are for the most part reconstructive in nature. Dependent admissions comprise 3 percent of the total which now averages 140 per month. Approximately 300 outpatients and 40 inpatients are seen in consultation per month.

A weekly staff conference is held for presentation of interesting cases and discussion of clinical and administrative problems. Two prominent civilian consultants, Dr. Robert Carroll and Dr. Charles Neer, hold monthly conferences on hand surgery and general orthopedics. Instruction of general medical officers and interns rotating through the service is mostly bedside in nature. The intern may elect orthopedics for a period of one or more months and is assigned to one of the fully trained staff members, working on his ward only. The intern has the opportunity to assist at a wide variety of surgical procedures and to perform simpler procedures.



PATHOLOGY SERVICE

The Pathology Service provides all the currently used routine clinical examinations and most of the less common ones. The clinical laboratories include chemistry, bacteriology, hematology, urinalysis, serology, blood bank, and immunohematology. A special Tuberculosis and Mycology Laboratory contains facilities for support of the hospital's pulmonary disease section and provides consultative support for other military laboratories. Cytogenetic studies are performed jointly with the Pediatric Service.

The service is approved for a four-year residency in Anatomic and Clinical Pathology. A wide range of local consultants is used on a regular basis and they are available for special problems at all times. An active teaching program is carried on at departmental and interdepartmental levels.

During 1968, the laboratories performed 113 autopsies, examined 4,671 surgical and 16,000 cytologic specimens and performed 700,000 clinical laboratory examinations.

Although interns do not routinely rotate through the Pathology Service, a one month elective is available on request.



RADIOLOGY SERVICE

The residency program is approved for training a total of three residents, with an annual input of one resident.

The first two years of radiology training consists of diagnostic radiology, including special procedures, with some radiologic physics, therapeutic radiology and nuclear medicine. The third year is devoted primarily to the study of radiation therapy, including the use of radium. The residents become familiar with supervoltage and cobalt therapy equipment and its proper employment in the treatment of neoplasms and, in addition, learn the indications for use of orthovoltage and superficial radiation therapy.

Approximately 100,000 x-ray examinations and over 2,000 radiation therapy procedures are performed yearly.

First year residents attend a comprehensive radiologic physics evening course at Columbia-Presbyterian Medical Center. Second year residents attend a two-month course in radioisotope techniques and nuclear medicine conducted at the Naval Medical School, National Naval Medical Center, Bethesda, Maryland. This course is preceded by the two-month period of study in radiation pathology at the Armed Forces Institute of Pathology, Washington, D. C. The third year resident spends approximately the first five months of his third year of residency at the Bellevue-New York University Hospital complex in New York City for experience in radium, cobalt 60 and megavoltage therapy.

Although interns do not routinely rotate through the Radiology Service, a one month elective is available on request.



ANESTHESIOLOGY SERVICE

The Anesthesiology Service performs approximately 3,000 anesthetic procedures yearly. All types of anesthetic agents, apparatus, and monitoring equipment are employed. Active services in all surgical specialties ensure broad experience in specialized anesthetic procedures, including cardiopulmonary bypass, hypothermia, and hypotensive anesthesia.

Interns may spend a one-month elective period on the Anesthesiology Service during which they learn basic anesthetic techniques, physics, physiology, and pharmacology, airway management, resuscitation, and pre and postanesthetic evaluations of patients.

A fully approved three-year anesthesiology residency is offered

with two residents being accommodated at each year level. In addition to wide experience in clinical anesthesia gained at this hospital, second year residents are assigned a two-month pediatric and obstetric anesthesia rotation at the Columbia-Presbyterian Medical Center. The third year of training, currently optional but strongly recommended, is tailored to the desires of the individual; it may consist of training in advanced clinical anesthesia, research, or in another discipline of medicine. Basic science lectures, seminars, a journal club, lectures by nationally famous anesthesiology consultants, and attendance at local and national anesthesiology meetings round out the resident's training.

THORACIC SURGERY SERVICE

The Thoracic Surgery Service offers a fully approved two-year training program with one resident at each year level. In addition, each of the general surgery residents has a four-month rotation in thoracic surgery.

The facilities of the service include a 25-bed ward and a special post-open heart recovery unit adjoining the main Intensive Care Unit. The recovery unit is equipped with electronic monitoring equipment.

The case load for an average week would include an open heart procedure, a major vascular case, and several thoracotomies. In addition, the Thoracic Surgery Service performs all of the bronchoesophageal endoscopic procedures.

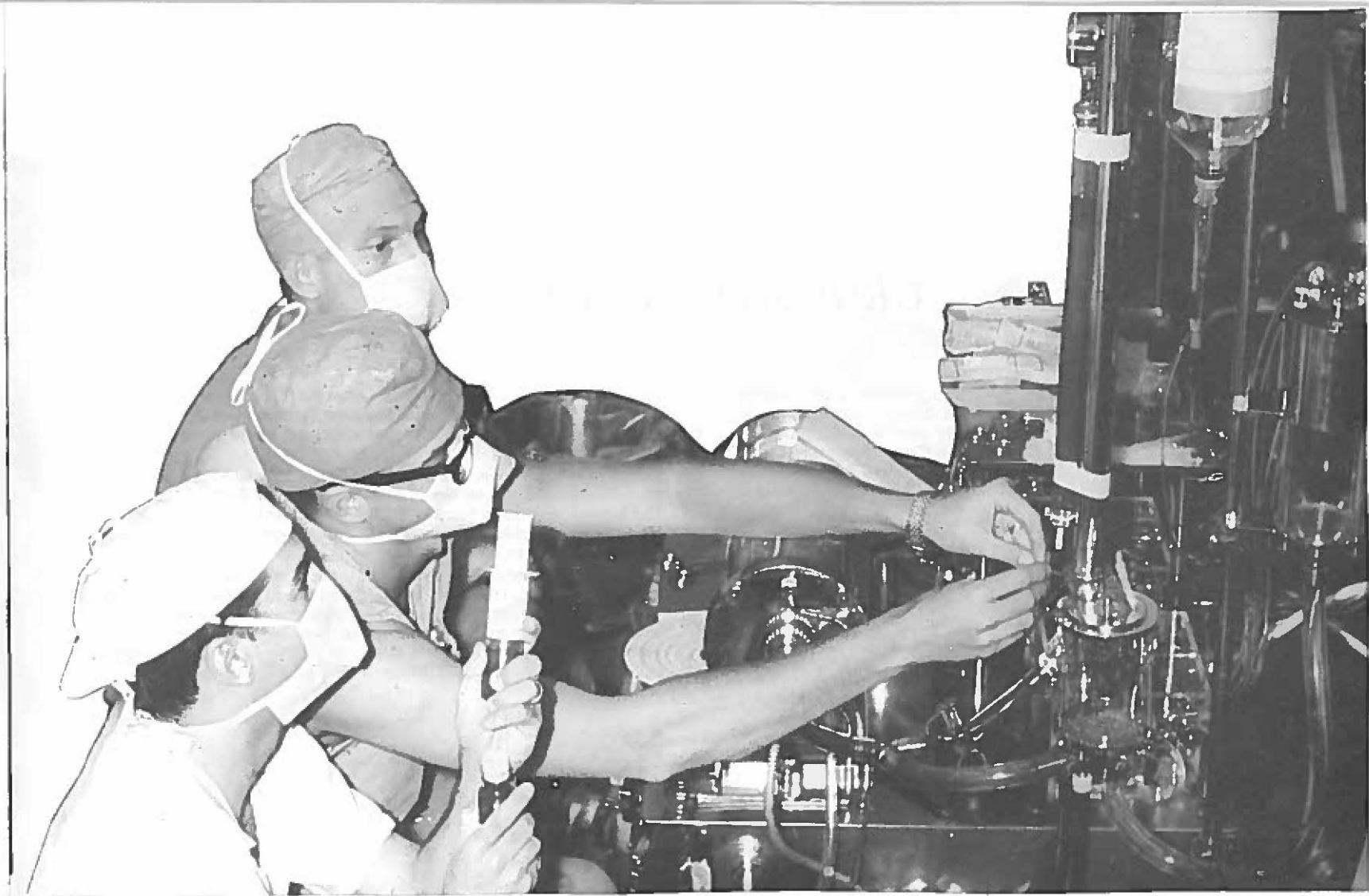
Close cooperation is maintained with the Tuberculosis, Pulmonary Disease and Cardiology Services and weekly joint confer-

ences with these services are held. In addition, a weekly conference is held with the Radiology Service to review all the x-rays of the past week. All cases of neoplasm are presented to the weekly Tumor Conference and an active Tumor Registry is maintained.

The following statistics are presented for 1968-1969:

Average Daily Census	25
Admissions	170
Deaths	20
Percent Autopsy	80%
Outpatient Visits	325

Although interns do not routinely rotate through the Thoracic Surgery Service, a one-month elective is available on request.



UROLOGY SERVICE

The internship and residency programs provide a systematic and progressive training in diagnosis, therapy, and endoscopic and operative procedures. The intern may elect a month or more rotation on the service. The full time staff consists of a Board Certified and a Board Eligible Urologist. The civilian consultant staff consists of four prominent physicians, Willet F. Whitmore, Jr., Hans H. Zinsser, John H. McGovern, and Keith R. Waterhouse. These consultants, because of their special interests in oncology, clinical urology, pediatric urology and research, aid in giving the resident a well-rounded approach to the practice of urology. There is approximately one 3-hour consultant visit per week. Research is stimulated and the facilities of the Surgical Research Laboratory, as well as the regular laboratories are available.

The Urologic Clinic consists of four x-ray rooms, two well-

equipped cystoscopy rooms, and various other spaces. The urology ward is a 34-bed unit in the new building of the hospital. Female, pediatric, and officer patients are maintained on their respective wards.

In the second year of urology training, two months are spent in pediatric urology at the Squire Urological Clinic of Columbia University and three months at Memorial Hospital in New York. The urology residency program is fully approved for one resident at each year level.

Over 700 consultations are seen in the clinic each month, with 175 pyelograms, 100 cystoscopies, and many other procedures performed. The average monthly admissions is 65, with approximately 40 being male and 25 being females and children. An active consultation service is supplied to the New London Submarine Base and to the Military Academy at West Point.



NEUROPSYCHIATRY SERVICE

The Neuropsychiatry Service has a staff of three fully trained psychiatrists, two fully trained neurologists, a clinical psychologist, two electroencephalogram (EEG) technicians, and a secretary. Two of the psychiatrists are in the psychoanalytic training program available in New York City.

The large outpatient clinic area and private offices are near the two wards provided for inpatient services. There are 66 beds available on the Acute Service. Neurology inpatients share the

open ward with the appropriate psychiatry inpatients.

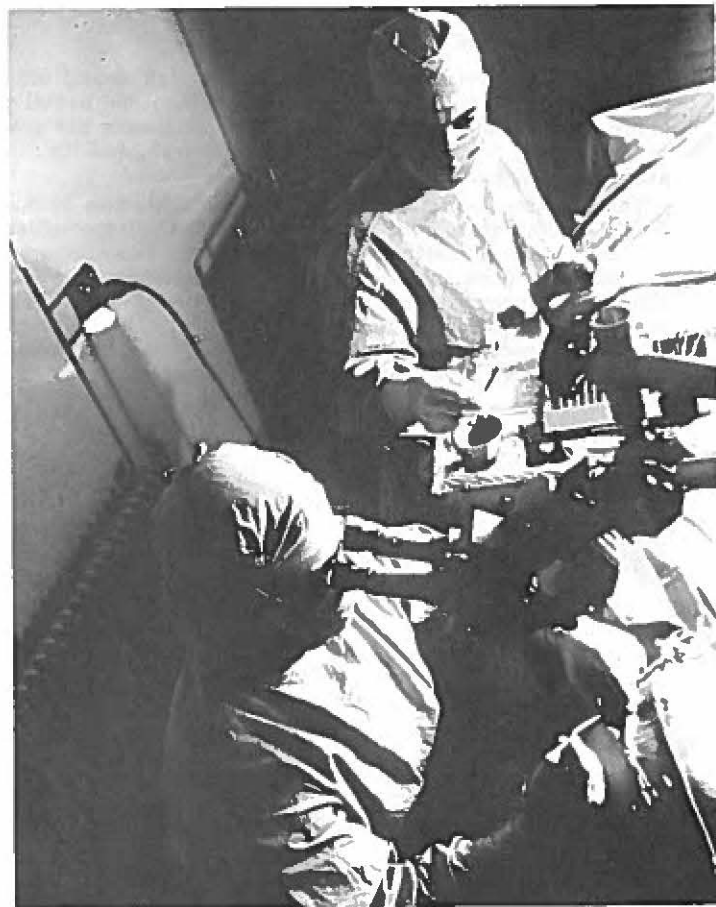
In 1969, the average inpatient census was 64 with an annual admission rate of 700 psychiatric and 220 neurologic inpatients. In the outpatient clinic, there were over 1,700 initial psychiatric consultations and 1,300 neurologic consultations plus their appropriate follow-up visits.

Although interns do not routinely rotate through the Neuropsychiatry Service, a one-month elective is available on request.

OTORHINOLARYNGOLOGY SERVICE

The Otorhinolaryngology Service provides a unique opportunity to the surgically oriented intern. A patient population spanning all age groups allows the interested physician to develop facility in direct and indirect examination of the head and neck, and an appreciation of disease involving the special senses and laryngeal apparatus. The intern will participate in and gain dexterity and understanding of the vestibular mechanisms. The service maintains close rapport with allied disciplines of plastic and oral surgery, enabling the intern to learn basic principles of cosmetic and reconstructive facial plastic surgery, management of facial bone trauma, and interpretation of x-rays of the head and neck. The intern will share in the over-all care of oncologic disease of the head and neck from diagnosis, through surgical extirpation, and onto plastic reconstruction.

The service offers one month rotations to provide interested interns with foundations of regional surgical care of the head and neck.



DENTAL SERVICE

The Dental Service staff consists of five staff dental officers, four interns, and two residents. Forty-six thousand dental procedures are accomplished yearly. The Dental Service has a ward for inpatients, treated by Oral Surgery Branch, and its census averages 20-30 patients.

The Rotating Dental Internship was established in 1948, and the four interns assigned receive training in all specialties of dentistry, general anesthesia, and hematology. In addition to the oral surgery residency, the service offers a postdoctoral fellowship in oral surgery. Each summer, the Dental Service has four dental clerkships for varying periods of time, either in research or clinical specialties. The facilities of the Surgical Research Laboratory are actively utilized by the service.

DERMATOLOGY SERVICE

The Dermatology Staff consists of two full-time physicians who are board eligible (or certified) in dermatology, a fully-trained dermatology technician corpsman, and an assistant hospital corpsman. The average monthly outpatient visits and inpatient consults total between 500 and 600.

The interns who choose a month's elective in dermatology are assigned to the offices of the staff dermatologists to learn the fundamentals of recognition of common problems and to observe the basic methods of therapy and the handling of dermatologic patients. They assist in the care and treatment of inpatients and outpatients.





